

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

DALE ROBERTSON,

23-cv-4977 (JGK)

Plaintiff,

ORDER

- against -

JACQUELINE FLUERINORD, ET AL.,

Defendants.

JOHN G. KOELTL, District Judge:

The telephone conference set for **January 25, 2025**, at **3:00 p.m.** is rescheduled to **February 8, 2024**, at **12:00 p.m.**

Dial-in: 888-363-4749, with access code 8140049. ,

The Clerk is directed to mail a copy of this Order and the attached consent to electronic service to the pro se plaintiff at:

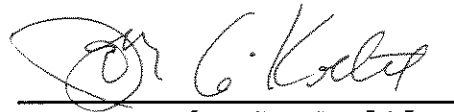
Dale Robertson

1027 East 211 Street

Bronx, NY 10469

SO ORDERED.

Dated: New York, New York
January 25, 2024



John G. Koeltl
United States District Judge

CONSENT TO ELECTRONIC SERVICE

I hereby consent to receive electronic service of notices and documents in my case(s) listed below. I affirm that:

1. I have regular access to my e-mail account and to the internet and will check regularly for Notices of Electronic Filing;
2. I have established a PACER account;
3. I understand that electronic service is service under Rule 5 of the Federal Rules of Civil Procedure and Rule 5.2 of the Local Civil Rules, and that I will no longer receive paper copies of case filings, including motions, decisions, orders, and other documents;
4. I will promptly notify the Court if there is any change in my personal data, such as name, address, or e-mail address, or if I wish to cancel this consent to electronic service;
5. I understand that I must regularly review the docket sheet of my case so that I do not miss a filing; and
6. I understand that this consent applies only to the cases listed below and that if I file additional cases in which I would like to receive electronic service of notices of documents, I must file consent forms for those cases.

Civil case(s) filed in the Southern District of New York:

Please list all your pending and terminated cases to which you would like this consent to apply. For each case, include the case name and docket number (for example, John Doe v. New City, 10-CV-01234).

Name (Last, First, MI)

Address

City

State

Zip Code

Telephone Number

E-mail Address

Date

Signature

Click Here to Save